

PART B - FEE(S) TRANSMITTAL

MAR 24 2005

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29540 7590 12/21/2004

PITNEY HARDIN LLP
7 TIMES SQUARE
NEW YORK, NY 10036-7311

03/25/2005 DENMANU2 00000096 09701662

01 FC:2501 700.00 OP
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Lindsay Adams	(Depositor's name)
<i>Lindsay Adams</i>	
(Signature)	
March 21, 2005	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/701,662	11/30/2000	Mark A. Hayes	31737PCTUSA	6662

TITLE OF INVENTION: CONTROL OF FLOW AND MATERIALS FOR MICRO DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	03/21/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
OLSEN, KAJ K	1753	204-601000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Pitney Hardin LLP

2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ARIZONA BOARD OF REGENTS

TEMPE, ARIZONA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 2

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1145 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Lindsay Adams

Typed or printed name Lindsay Adams

Date March 21, 2005

Registration No. 36,425

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